COMCAST SPOTLIGHT

POLITICAL RECORD OF REQUEST: FEDERAL, STATE & LOCAL CANDIDATE ADS ALL QUESTIONS MUST BE ANSWERED

	Federal Candidate
X	State or Local Candidate
1.	Requested by: KASTU Adverting POBOX 702425 Plymouth MI 450 (Agency name, address, phone number & contact)
2.	On behalf of: Bob Howey HD-23 (Candidate name & authorized campaign committee name)
3.	Election: HD-27 Nov 8, 2016 (Office sought & date)
4.	Date of request: 10 (28 / 14
	Request received by:
6.	Details/Content of the Ad: Vote for Bob Howey
7.	Name, address & phone number of contact person for the candidate or candidate's authorized campaign committee:
8.	Name of treasurer of authorized committee: John Mc Namora
9.	Date and nature of follow-ups, if any:
10.	. Disposition: ☐ Accepted – see attached contract details ☐ Rejected – provide reason:
Co	omcast Representative
	gned: The sum of the
8	Samen's martin/AE
	10/28/16